

Live Entertainment Tax Report

This report, together with your remittance payable to the order of the NEVADA GAMING COMMISSION, is required to be filed MONTHLY, NOT LATER THAN THE 24th DAY OF THE MONTH, covering the preceding calendar month.

FOR OPERATIONS DURING THE MONTH OF:

FILING DEADLINE:

Account No., Name, Address, Zip Code

For Office Use Only

Please correct if in error

Check
Number _____

Batch
Number _____

Entry
Date _____

THIS REPORT IS REQUIRED FOR THOSE LOCATIONS THAT LICENSE MORE THAN 50 SLOT MACHINES, MORE THAN 5 GAMES OR ANY COMBINATION THEREOF AND OFFER LIVE ENTERTAINMENT IN A FACILITY WITH A MAXIMUM OCCUPANCY/SEATING OF LESS THAN 7500. FOR ALL OTHER LOCATIONS, THIS REPORT SHOULD ONLY BE COMPLETED IF ENTERTAINMENT IS PROVIDED IN A FACILITY WITH A MAXIMUM OCCUPANCY/SEATING OF AT LEAST 300 AND AN ADMISSION CHARGE IS COLLECTED.

1. TAXABLE SALES

NOTE: TAXABLE SALES FOR PURPOSE OF LET ARE NET OF SALES
AND USE TAXES

\$ _____

2. LIVE ENTERTAINMENT TAX COMPUTATION

[Amount on Line 1 times 10%]

3. PENALTY FOR LATE PAYMENT: NRS 463.270(5)

A. Fewer than 10 days late:
25% of the amount due on Line 2 but
not less than \$50 or more than \$1,000

\$ _____

B. Ten or more days late:
25% of the amount due on line 2 but
not less than \$50 or more than \$5,000

PENALTY DUE [Line 3A or Line 3B]

4. TOTAL AMOUNT DUE [Line 2 + Line 3]

\$ _____

5. TOTAL REMITTANCE

Check Number: _____

**Please make remittance payable to the Nevada Gaming Commission and return to
State Gaming Control Board, Tax and License Division, P.O. Box 8004, Carson City, NV 89702-8004**

I, _____, certify and declare under the penalties of perjury that I am the
_____ of the business named above; that this is a true, correct and complete report to the
(Owner, Partner, President, Treasurer, Other-describe)
best of my knowledge, information, and belief; and that this application and report is made with the knowledge and
consent of all other individuals licensed.

Dated _____

Signed _____

Person to contact regarding this report:

Name: _____ Phone: _____

RETURN ORIGINAL AND MAKE DUPLICATE FOR YOUR RECORDS